

**COMPLIANCE DATES FOR *ARNOLD V. ADHS* REQUIREMENTS**  
**December 15, 2004**

Requirement	Year				
	2004	2005	2006	2007	2008
<b>ARIZONA STATE HOSPITAL</b>					
1. Create community living arrangements plus appropriate support.				June	
2. Arizona State Hospital census no more than 55 civil class members.		June			
3. At least 85 class members discharge must have lengths of stay longer than 1 year.		June			
4. ADHS will seek legislation to allow ASH funds to flow to the community.	Done				
<b>SUPERVISORY CARE HOMES</b>					
5. ADHS will provide 300 community living arrangements with appropriate supports. This will be satisfied when ADHS demonstrates that 285 class members were discharged from supervisory care homes on or after January 1, 1995.				June	
6. 200 of the 285 living slots will go to individuals living in the "priority" homes.				June	
7. ADHS will use best efforts to transfer all other class members residing in supervisory care but will provide all class members remaining in SCH with appropriate supports consistent with their needs.				June	
8. ADHS will not transfer or recommend that any class members reside in SCH homes without enacting rigorous practices to find other placements.		June			
<b>INPATIENT SERVICES</b>					
9. ADHS will develop a crisis network through the addition of 4.3 million dollars.		June			
10. ADHS will provide additional funds (as they become available) for mobile outreach, in-home respite supports, crisis stabilization programs with 24 hour crisis and respite beds, urgent care centers, jail diversion component and acute inpatient services.				June	
11. ADHS will ensure that there are no admissions or readmissions directly into ASH from community programs. All admissions to ASH shall be from one of the crisis networks.		June			

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12. ADHS will take all steps to prevent unnecessary admissions or unnecessary lengths of stay by the development of special procedures concerning appropriateness of admission or length of stay.		June			
<b>VOCATIONAL AND HOUSING</b>					
13. ADHS will make efforts to ensure that adequate supported employment and other vocational services are funded and provided through a contract with RSA.				June	
14. If funds are not sufficient, ADHS will use best efforts to obtain additional funding for vocational services.					June
15. ADHS will make reasonable efforts to pursue and maintain federal funds for housing and use their best efforts to obtain additional funding for housing if federal funding is not available.				June	
<b>BUDGET ISSUES</b>					
16. ADHS Director will use best efforts to ensure additional funding. ADHS will provide the Governor and the Legislation amount and rationale for budget requests.		June	June	June	June
<b>QUALITY MANAGEMENT PLAN</b>					
17. Approved QM plan by which ADHS will measure requirements and have self correcting mechanisms in place. QM plan must address the adequacy of services, human rights, client rights, ISP, client grievance process.				June	
18. QM, at minimum must measure:  Whether the client has an ISP; Whether the client is receiving services which are consistent with their ISP; Whether the client is receiving services which are adequate, appropriate and least restrictive; Whether the client is receiving services in the most normal and least restrictive setting.			June		
<b>APPENDIX C</b>					
1. Priority clients have case managers.		June			

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	2004	2005	2006	2007	2008
2. Priority clients have clinical teams which include the client, nurse, physician, case manager and vocational specialist, unless employment has been determined as no longer to be an issue.		Five Target Sites Priority Clients April-85%  Remaining Sites Priority Clients April-65%	Fifteen Target Sites Priority Clients April-85%  Remaining Sites Priority Clients April-65%	All Sites Priority Clients April-85%	
3. Priority clients have ISP's with a functional assessment and a long-term view within 90 days of enrollment.		Five Target Sites Priority Clients April-85%  Remaining Sites Priority Clients April-65%	Fifteen Target Sites Priority Clients April- 85%  Remaining Sites Priority Clients April-65%	All Sites Priority Clients April-90%	
4. Priority clients have periodic reviews at least every six months.		Priority Clients June-35%	Priority Clients June-65%	Priority Clients June-85%	
5. Whenever there is a substantial reduction of services, a substantial modification of services or a termination of services, the ISP is modified with the client's consent or consistent with ISP rules.			June-60%	June-80%	
6. Class members are informed of their right to appeal eligibility and treatment decisions.		June- 35%	June-65%	June-90%	

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7. The needs of priority clients are met, consistent with their ISP.		Five Target Sites Priority Clients July-60%	Fifteen Target Sites Priority Clients July-60%	All Sites Priority Clients June-60%	All Sites Priority Clients June-80%
8. The needs of class members are substantially met, consistent with their ISP.		Five Target Sites July-30%	Fifteen Target Sites July-60%	All Sites April-60%	All Sites April-80%
9. Class members participate in the planning and development of their ISP.		Five Target Sites Priority Clients April 80%  Remaining Sites Priority Clients April-60%	Fifteen Target Sites April-80%  Remaining Sites Priority Clients April-60%	All Sites April-80%	
10. Class members in need of special assistance are offered or provided reasonable assistance by ADHS or the RHBA in the ISP and grievance process.			June-60%	June-80%	
11. Class members charts show documentation of adequate informed consent to medications, ECT, and surgically related procedures to address mental health conditions.		June-30%	June-60%	April-85%	
12. Class members in inpatient treatment for more than 7 days have an ITDP derived from their ISP.		June-35%	June-65%	June-85%	
14. RBHA and provider staff receive adequate orientation and training.			June-60%	June-80%	

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15. All programs funded by ADHS substantially provide services which are consistent with respect and humane treatment. 24 hour residential programs, inpatient and day/vocational programs provide services which are consistent with self-determination, integration. In addition, supported housing by ADHS or its designee is consistent with the provision of special assistance.			June-30%	June-60%	June-85%
16. ADHS or its designee shall investigate reports of abuse and neglect, shall review death reports, and shall investigate deaths when required.			June-60%	June-85%	
17. ADHS tracks and trends grievance/appeal/requests for investigation information to determine whether appeals or grievances are resolved in a timely manner and whether recommendations or decisions are implemented.			June-60%	June-85%	
<b>SUPPLEMENTAL AGREEMENT</b>					
1. ADHS must evaluate the unmet needs of class members and develop a specific level of additional services to address these unmet and unfunded needs.				June	
2. ADHS must develop a significantly enhanced provider capacity, particularly with respect to vocational, housing and substance abuse services. ADHS must develop specific strategic plans for vocational, housing and substance abuse services which become a part of the Supplemental Agreement.				June	
3. ADHS, in conjunction with HSRI, will develop a service capacity plan which becomes part of the Supplemental Agreement.	Done				
4. The service capacity attachment may be modified over time by the agreement of the parties based upon new information about needs, service designs or any other relevant data.	Dec.				
5. ADHS will make funding requests in accordance with the service capacity plan.					
6. ADHS will implement the housing, vocational and substance abuse plans.				June	
7. ADHS will develop an approved case management plan which becomes part of the Supplemental Agreement.	Done				

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8. ADHS will develop functional clinical teams with enhanced clinical leadership.			June		
9. ADHS will conduct regular reviews of the operations of the clinical teams.			June		
10. ADHS shall ensure the RBHA develops standards for the provider network for access, admissions, process of care, transitions to other services and program models.			June		
11. ADHS shall ensure that the RBHA develops performance measures and sanctions for non compliance with the provider standards. The parties shall attempt to agree on these requirements and sanctions.			June		
12. ADHS shall ensure substantial compliance by the RBHA and the provider network with the ADHS rules.			June		
13. ADHS shall establish specific standards with respect to rules on individual service planning, the provision of special assistance and client rights and will be included in provider contracts.			June		
14. The parties will agree on these standards which shall be filed with the court.			June		